North East Medical Services

Population Health Learning Network – Year 2

Adolescent Behavioral Health Screening Improvement Project

NORTH EAST MEDICAL SERVICES
東 北 醫 療 中 心
a california health center

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We Aimed To

- Improve Existing Depression Screening Process for Adolescents (age 12-17)
- Connect Patients to Appropriate Behavioral Health Services
- Ensure All NEMS Clinics have Standardized Integrated Primary Care and Behavioral Health Care Teams

We Measured

- # PHQ-2s Administered
  # PHQ-2 Red Flags
  # PHQ-9's Completed
- % BH Follow-Up Rate for PHQ-9 Red Flags
- % Adolescent Depression Screening Compliance Rate

Changes – All Tested and Implemented

Technology

- Standardization of Questionnaire
- Adoption of Formalized Workflow
- Implementation of Policies and Procedures
- Movement of Decline Button

Staff Trainings

- Multiple Trainings
- Emphasis of FD/MA Staff Trainings
- Adaption to Emerging Situations: Patients hand back iPad, do not finish screening, etc.

Data Collection

- Alignment with Organizational Goals
  - Excluding false positive patients
  - Shortening follow-up timeframe to same-day

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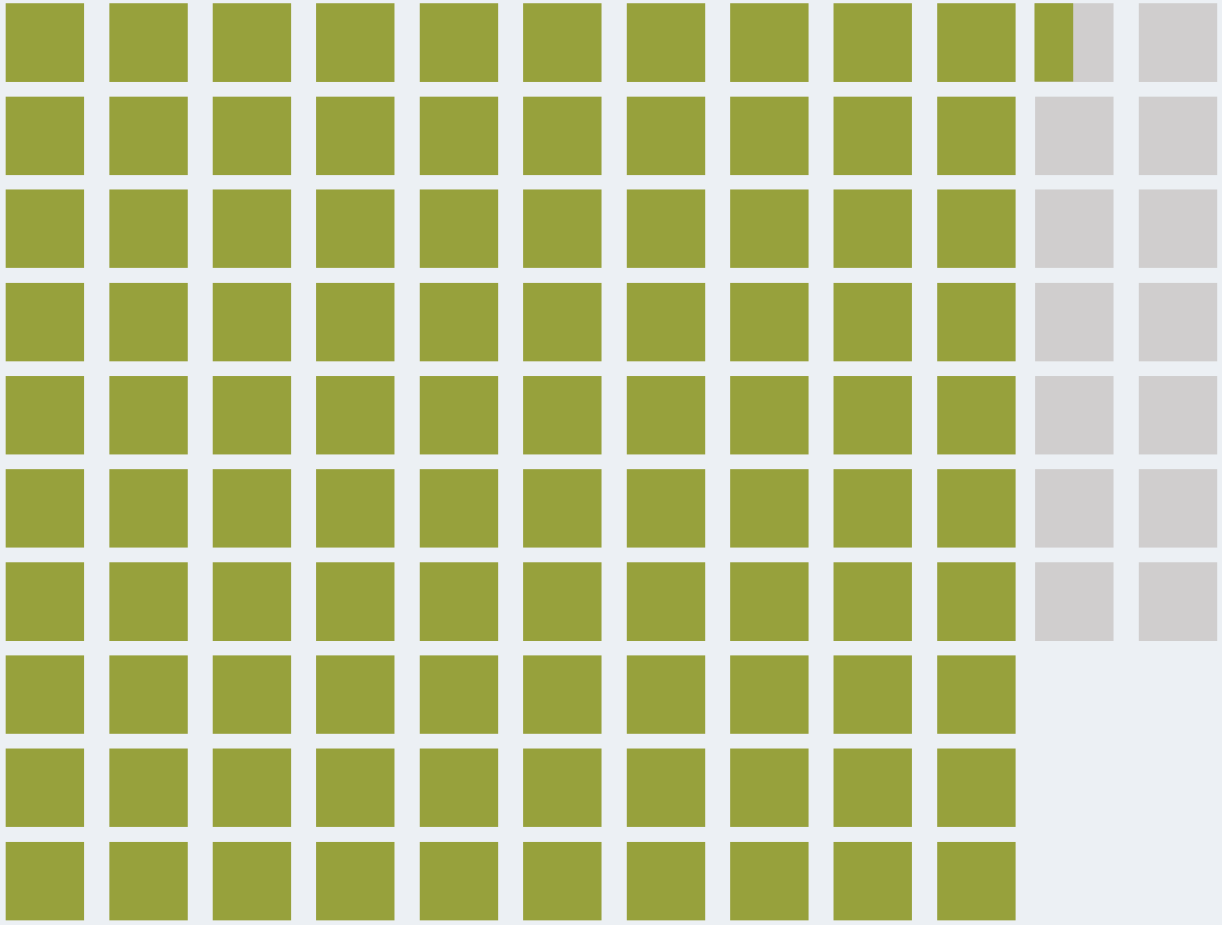
As of 3rd Progress Report (up to 9/30/19)

2512 PHQ-2s Administered

2018 Baseline: 2457
Goal: 2850



= 25 Units

= PHQ-2s

= PHQ-2s Remaining from Goal

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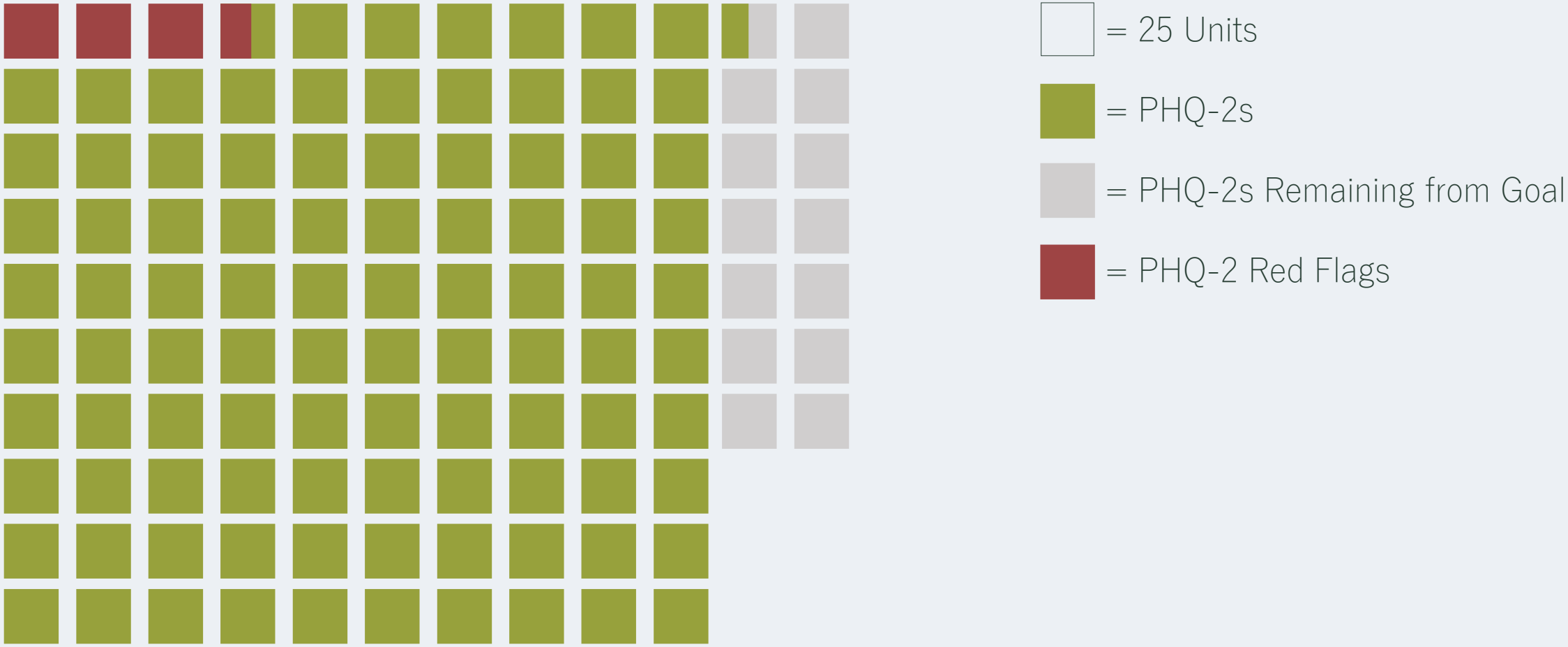
As of 3rd Progress Report (up to 9/30/19)

92 PHQ-2 Red Flags

2018 Baseline: 114
Goal: 125



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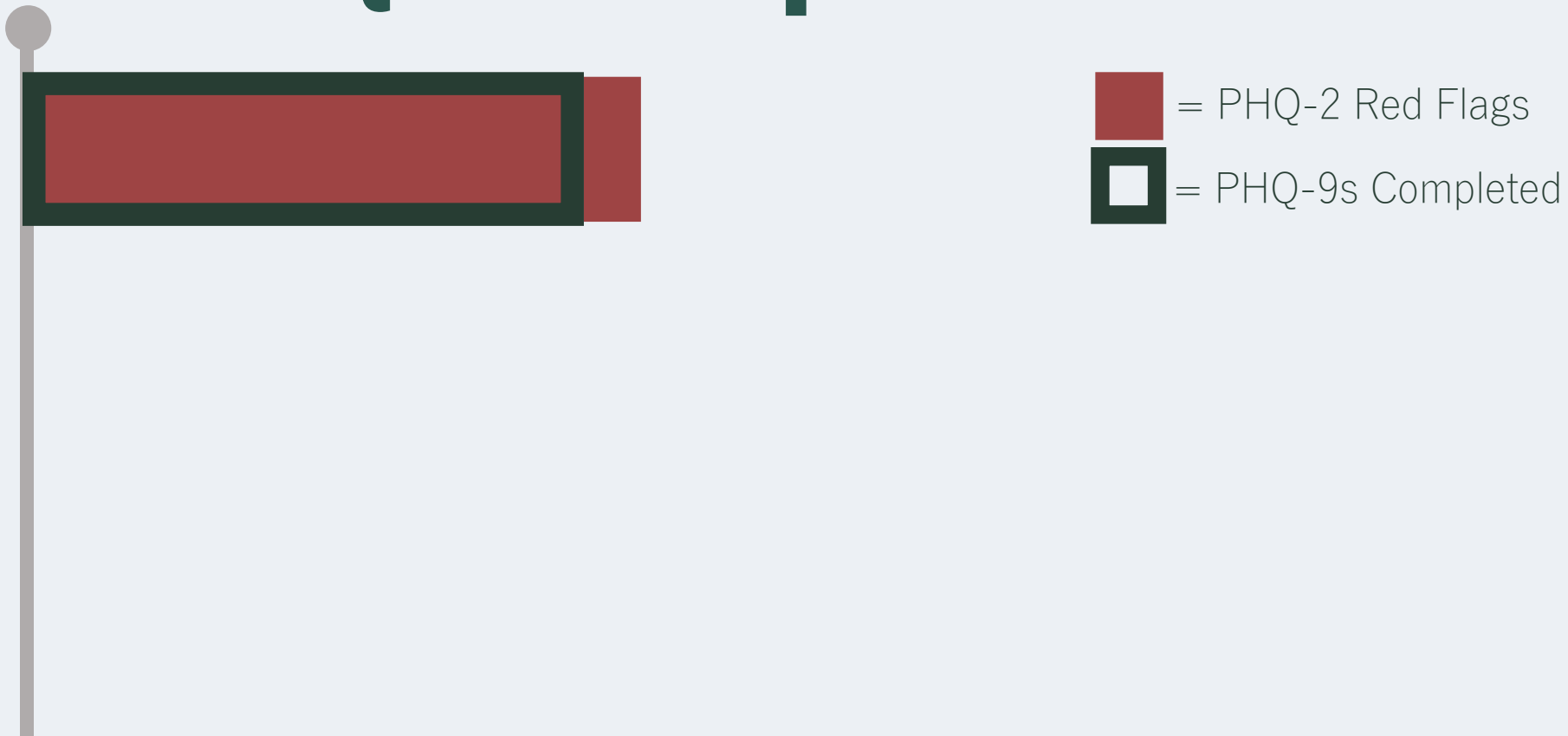
As of 3rd Progress Report (up to 9/30/19)

92 PHQ-2 Red Flags

2018 Baseline: 114
Goal: 125

86 PHQ-9s Completed

2018 Baseline: 86
Goal: 95



Data Discoveries

Reasons for PHQ2 Red Flag - PHQ9 Completion Gap

1. iPad Not Implemented
2. Patient Declined Screening
3. Lack of Time

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As of 3rd Progress Report (up to 9/30/19)

88.00% BH Follow-Up Rate for PHQ-9 Red Flags

Goal: 60%

88.16% Screening Compliance Rate

Goal: 73%

Strategies for Success

Conversations between Primary Care, BH, Data, and Project Teams

- Explore on-the-ground causes and consequences for observed data
- Implement changes from multiple levels

Regular tracking of monthly data trends

- Frequently touch base with data team to refine data capturing methods

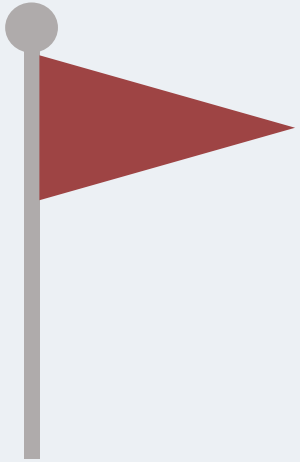
Speaking with other teams/advisors through CCI Channels

- Receive external perspectives on individual issues
- Collaborate on solutions to shared issues
- Gain knowledge of different workflows

Key Tools and Resources

iPad Screenings

- Uniform and consistent screening process across organization
- Greater patient autonomy in answering questions



Automatic Generation of Follow-Up Reports

- Removes paper form data entry wait time
- Immediate ability to check in with patient/PCP and coordinate care

Integrated Care Approach

- Promotes organization-wide shift towards team based care
- Interdepartmental understanding of BH link to physical health

Spreading

Using Data to Create Workable Processes to Better Help Patients

Sustaining

Facilitate Increased Collaboration between Primary Care and Behavioral Health Teams

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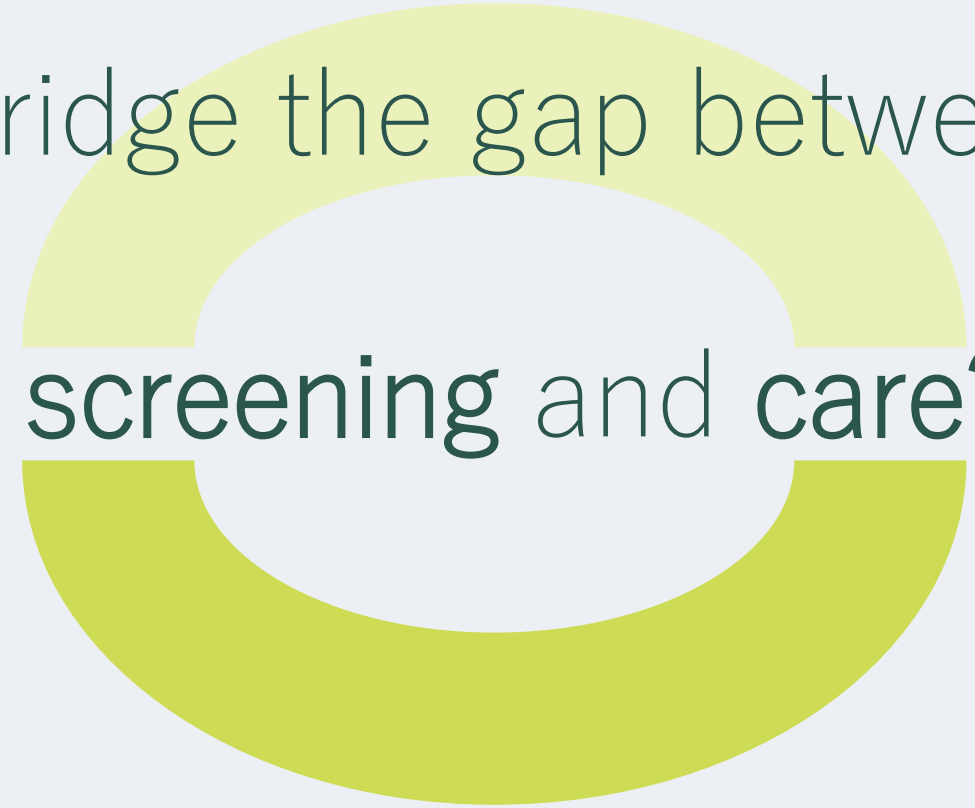
Challenges

For red-flag patients who deny the need for follow-up care but present with obvious, unaddressed behavioral health symptoms during future medical appointments, how can we

bridge the gap between



screening and **care**?

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Thank you!

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